



Dart Aerospace Ltd.  
1270 Aberdeen St  
Hawkesbury, ON  
K6A 1K7  
Canada

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RBE105-31781W2-29

Job Sheet 185446



Part No: RBE105-31781W2-29

Job Qty: 2 ea

Part Name: 040.01 Cutter



Part Weight: 0 lbs

Status: New

Priority: Medium

Job Created: 10/26/18

Job Tracking No:

Due Date: 11/9/18

Created By: Marie Lajeunesse

Type: SOLD

Description:

Note: DWG RBE105-31781W2 Rev.0 IPP Rev. A 18.10.25 New issue DP Verify DD

Ship Via:

### Bill of Materials

### Job Routing

| Op No | Operation          | Qty   | Start Date | Due Date | Standard  |         | Workcenter/Supplier   |           | Sign-off |
|-------|--------------------|-------|------------|----------|-----------|---------|-----------------------|-----------|----------|
|       |                    |       |            |          | Setup Hrs | Run Hrs | Workcenter / Supplier | Lead Time |          |
| 90    | Start up Operation | 2 Ea  | 11/9/18    | 11/9/18  | 0.00      | 0.00    | Start Up Small Fab-2  |           | MLC      |
| 110   | Small Fab          | 2 pcs | 11/9/18    | 11/9/18  | 0.00      | 0.20    | Small Fab-3           |           | MLC      |
| 120   | QC                 | 2 pcs | 11/9/18    | 11/9/18  | 0.00      | 0.00    | QC5                   |           | 30       |
| 130   | Packaging          | 2 pcs | 11/9/18    | 11/9/18  | 0.00      | 0.00    | Packaging3-1          |           | 9-88     |
| 140   | QC21-SA            | 2 Ea  | 11/9/18    | 11/9/18  | 0.00      | 0.00    | QC21                  |           |          |

Part Op  
Descriptions: 110 - 1-Laser engrave P/N "040.01" as per DWG.

DEC 21 2018  
GA138

### Job BOM

| Part / Item | Component Name | Quantity | Operation             | Container |
|-------------|----------------|----------|-----------------------|-----------|
| RI000294    | Cutter         | 2 (1 ea) | 90-Start up Operation | 5133917   |

### Job Allocations

| Operation             | Component Part | Required | Inventory | Allocated |
|-----------------------|----------------|----------|-----------|-----------|
| 90-Start up Operation | RI000294       | 2        | 0         | 0         |

### Part Specifications

Specifications could not be found.



Container No: S139674



Part: RBE105-31781W2-29

Job No: 185446

Serial No/Batch: S139674

Revision: 0

Inspector:

Exp Date:

Instructions:

Dart Aerospace Ltd.  
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Plex 10/26/18 12:39 PM Dart.lajeunesse.marie

Date: 12/20/18



DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

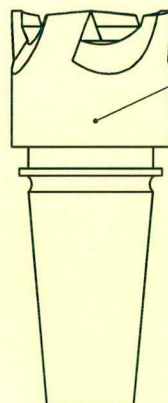
QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

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| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Suspected Unapproved <input type="checkbox"/> | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Cross tube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                       |  |
| Date :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Step #:                                                                                                                                                                            | QTY Effective :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | MRB (QSI042) Approval |  |
| <b>Description Work Order Deviation</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <b>Disposition</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                       |  |
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| <b>Root Cause</b><br><div style="display: flex; justify-content: space-between;"> <div>           Environment <input type="checkbox"/><br/>           Design <input type="checkbox"/><br/>           Doc/Data <input type="checkbox"/><br/>           Equip/Tooling <input type="checkbox"/><br/>           Handling/Pre <input type="checkbox"/><br/>           Material <input type="checkbox"/><br/>           Internal Transport <input type="checkbox"/><br/>           Tribal Knowledge <input type="checkbox"/><br/>           LOA <input type="checkbox"/><br/>           Substation <input type="checkbox"/><br/>           Past Expiry Date <input type="checkbox"/><br/>           Misidentified <input type="checkbox"/> </div> <div>           No Re-verification <input type="checkbox"/><br/>           Operator <input type="checkbox"/><br/>           Offset/Setup <input type="checkbox"/><br/>           Supplier <input type="checkbox"/><br/>           Training <input type="checkbox"/><br/>           Use for Testing <input type="checkbox"/><br/>           Poor Information <input type="checkbox"/><br/>           Rushing <input type="checkbox"/><br/>           Product Improvement <input type="checkbox"/><br/>           Process Improvement <input type="checkbox"/><br/>           Manufacturing Process <input type="checkbox"/><br/>           Past Due <input type="checkbox"/> </div> </div> |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <b>FAULT CATEGORY</b><br><div style="display: flex; justify-content: space-between;"> <div>           Pressure/Forced <input type="checkbox"/><br/>           Bending <input type="checkbox"/><br/>           Centre Not Concentric <input type="checkbox"/><br/>           Cracks <input type="checkbox"/><br/>           Crimp/Kink/Ripple/Wave <input type="checkbox"/><br/>           Cuffs <input type="checkbox"/><br/>           Crushing <input type="checkbox"/><br/>           Heat Treat <input type="checkbox"/><br/>           Wave/Twist in Tube <input type="checkbox"/><br/>           Marks/Chatter <input type="checkbox"/> </div> <div>           Temperature/Cure <input type="checkbox"/><br/>           Set-up <input type="checkbox"/><br/>           BOM/Route <input type="checkbox"/><br/>           Broken/Damage/Defect <input type="checkbox"/><br/>           Inspection Incomplete/Unqualified <input type="checkbox"/><br/>           Contamination <input type="checkbox"/><br/>           Countersink <input type="checkbox"/><br/>           Cut Too Short <input type="checkbox"/><br/>           Instructions Incomplete/Unclear <input type="checkbox"/><br/>           Drill Holes <input type="checkbox"/> </div> <div>           Power Loss/Surge <input type="checkbox"/><br/>           Folio/Program <input type="checkbox"/><br/>           Grain <input type="checkbox"/><br/>           Weld <input type="checkbox"/><br/>           Wrong Stock Pulled <input type="checkbox"/><br/>           Out of Sequence <input type="checkbox"/><br/>           Off-set <input type="checkbox"/><br/>           Misabeled <input type="checkbox"/><br/>           Fit/Function <input type="checkbox"/><br/>           Misaligned/off center <input type="checkbox"/> </div> <div>           Positioned Wrong <input type="checkbox"/><br/>           Outside Dimensions <input type="checkbox"/><br/>           Over/Under tolerance <input type="checkbox"/><br/>           Part Incorrect <input type="checkbox"/><br/>           Part Lost/Missing <input type="checkbox"/><br/>           Part Moved <input type="checkbox"/><br/>           Drawing <input type="checkbox"/><br/>           Finish <input type="checkbox"/><br/>           Misread <input type="checkbox"/><br/>           Turning Sequence <input type="checkbox"/> </div> </div> |                       |  |
| OTHER : <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                       |  |

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| REVISIONS |     |             |      |         |          |
|-----------|-----|-------------|------|---------|----------|
| REV       | ECR | DESCRIPTION | DATE | INITIAL | APPROVED |



LASER ENGRAVE P/N, "040.01"

SHOP COPY  
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ENGINEERING  
UNCONTROLLED COPY  
SUBJECT TO AMENDMENT  
WITHOUT NOTICE  
WORK ORDER

NO. 185446 MJS  
1870-26

(-29)

040.01 CUTTER

|                                     |                                                        |
|-------------------------------------|--------------------------------------------------------|
| <b>DART<br/>AEROSPACE</b>           |                                                        |
| TITLE<br><b>CUTTING TOOL</b>        |                                                        |
| DWG NO.<br><b>RBE105-31781W2-29</b> | REV                                                    |
| MAT'L STEEL                         | UNLESS OTHERWISE SPECIFIED<br>DIMENSIONS ARE IN INCHES |
| HEAT TREAT                          | .XXX ± .005 FRACTIONS ± 1/8                            |
| FINISH                              | .XX ± .01 ANGLES ± .5°                                 |
| SPEC                                | .X ± .1 SURFACES = 125✓                                |
| DRAWN BY: <b>MACKOVJAK</b>          | 1. BREAK ALL SHARP EDGES<br>.015 x 45° OR .015R        |
| CHECKED:                            | 2. DIMENSIONAL LIMITS APPLY<br>AFTER PLATING           |
| OPPS APPR:                          | 3. INTERPRET DIM AND TOL PER<br>ASME Y14.5M-2009       |
| QA APPR:                            | USED ON MODEL                                          |
| APPROVED:                           | <b>EC145, H145</b>                                     |
| SCALE <b>1:1</b>                    | DATE <b>04/08/2017</b> SHEET <b>12 OF 12</b>           |



